

PASSENGER LIST FORM – VEHICLE

(to be completed and submitted to Principal or Principal Designate prior to departure)

Employee Sponsor: _____	Grade: _____
Trip Destination: _____	Date(s): _____

Vehicle #1	
Driver's Name: _____	Student Names: _____
License Plate #: _____	_____
Cell #: _____	_____
Volunteer Driver's Form Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Staff/Parent/Student/Other: _____	_____

Vehicle #2	
Driver's Name: _____	Student Names: _____
License Plate #: _____	_____
Cell #: _____	_____
Volunteer Driver's Form Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Staff/Parent/Student/Other: _____	_____

Vehicle #3	
Driver's Name: _____	Student Names: _____
License Plate #: _____	_____
Cell #: _____	_____
Volunteer Driver's Form Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Staff/Parent/Student/Other: _____	_____

Vehicle #4	
Driver's Name: _____	Student Names: _____
License Plate #: _____	_____
Cell #: _____	_____
Volunteer Driver's Form Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Staff/Parent/Student/Other: _____	_____